

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	COMMITTEE	LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>John M. Persinger</i>						
STREET ADDRESS <i>100 State Street, Suite 700</i>						
CITY <i>Erie</i>		STATE <i>PA</i>		ZIP CODE <i>16507</i>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION <input checked="" type="checkbox"/> 7. ANNUAL REPORT		<i>Mayor - City of Erie</i>				
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <i>10 24 2017 TO 11 27 2017</i>		DATE OF ELECTION MO. DAY YEAR <i>11 07 2017</i>		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>		FOR OFFICE USE ONLY 2017 DEC - 7 PM 3:41 ERIE COUNTY VOTER REGISTRATION		
		AMENDMENT REPORT? YES NO TERMINATION REPORT? YES NO				

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

*7th* DAY OF *December* 20*17*

*Susan M. Turner*  
 SIGNATURE

MY COMMISSION EXPIRES *July 5 2021*  
 MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

*John M. Persinger*  
 PRINTED NAME

*814* *870-7702*  
 AREA CODE DAYTIME TELEPHONE NUMBER

**PART II -**

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

\_\_\_\_ DAY OF \_\_\_\_ 20\_\_

\_\_\_\_\_  
 SIGNATURE

MY COMMISSION EXPIRES \_\_\_\_ MO. \_\_\_\_ DAY \_\_\_\_ YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

\_\_\_\_ AREA CODE \_\_\_\_ DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL  
 SUSAN M. TURNER, NOTARY PUBLIC  
 ERIE, ERIE COUNTY, PA  
 MY COMMISSION EXPIRES ON JULY 5, 2021